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Bib Data Sheet

CONFIRMATION NO. 6444

SERIAL NUMBER 10/043,474	FILING DATE 01/10/2002 RULE	CLASS 717	GROUP ART UNIT 2192	ATTORNEY DOCKET NO. 42390.P8254
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APPLICANTS

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** CONTINUING DATA ***** C.C.

** FOREIGN APPLICATIONS ***** C.C.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 02/12/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <i>C.C. - C.C. - C.C.</i> Examiner's Signature Initials	STATE OR COUNTRY ISRAEL	SHEETS DRAWING 6	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 3
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TITLE
 Register allocation for program execution analysis

FILING FEE RECEIVED 996	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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